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| Issue Classification  | Application/Control No. 10642332 | Applicant(s)/Patent Under Reexamination PARDO, MIGUEL ALEJANDRO |
| | Examiner William C Joyce | Art Unit 3656 |

| ORIGINAL | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | | | | |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|---------------------|-------------|--|--|--|--|--|--|--|
| CLASS | | SUBCLASS | | | | CLAIMED | | | | | NON-CLAIMED | | | | | | | |
| 74 | | 458 | | | | F | 1 | 8 | H | 1 / 08 (2008.01.01) | | | | | | | | |
| CROSS REFERENCE(S) | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | | | | | | | | |
| 74 | 414 | 424.5 | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 | | | | | | | | | | | | | | | |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| - | 1 | 1 | 17 | | | | | | | | | | | | |
| - | 2 | 2 | 18 | | | | | | | | | | | | |
| - | 3 | 3 | 19 | | | | | | | | | | | | |
| - | 4 | 4 | 20 | | | | | | | | | | | | |
| - | 5 | 5 | 21 | | | | | | | | | | | | |
| - | 6 | 6 | 22 | | | | | | | | | | | | |
| - | 7 | 7 | 23 | | | | | | | | | | | | |
| - | 8 | 8 | 24 | | | | | | | | | | | | |
| - | 9 | 9 | 25 | | | | | | | | | | | | |
| - | 10 | 10 | 28 | | | | | | | | | | | | |
| - | 11 | 11 | 27 | | | | | | | | | | | | |
| - | 12 | 12 | 28 | | | | | | | | | | | | |
| - | 13 | - | 29 | | | | | | | | | | | | |
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| NONE | | Total Claims Allowed: | |
| | | 12 | |
| (Assistant Examiner) | (Date) | | |
| /William C Joyce/ Primary Examiner Art Unit 3656 | 2/17/09 | O.G. Print Claim(s) | O.G. Print Figure |
| (Primary Examiner) | (Date) | 1 | 9 |